

## BEST AVAILABLE COPY

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
<b>CLAIMS</b>									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
1	1					51			
2		1				52			
3		1				53			
4		1				54			
5		1				55			
6		1				56			
7		1				57			
8	1					58			
9		1				59			
10		1				60			
11		1				61			
12		1				62			
13		1				63			
14	1					64			
15		1				65			
16		1				66			
17		1				67			
18		1				68			
19		1				69			
20		1				70			
21		1				71			
22		1				72			
23		1				73			
24		1				74			
25		1				75			
26		1				76			
27		1				77			
28		1				78			
29		1				79			
30		1				80			
31		1				81			
32	1					82			
33		1				83			
34		1				84			
35		1				85			
36		1				86			
37		1				87			
38		1				88			
39		1				89			
40		1				90			
41		1				91			
42		1				92			
43						93			
44						94			
45						95			
46						96			
47						97			
48						98			
49						99			
50						100			
TOTAL IND.	5		↓			TOTAL IND.		↓	
TOTAL DEP.	37	←	↓	←	↓	TOTAL DEP.	←	↓	←
TOTAL CLAIMS	42					TOTAL CLAIMS			

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS